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PTO/SB/22 (10-00)  
Approved for use through 10/31/2002. OMB 0651-0031  
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) Docket Number (Optional)  
5820.603

Send to: Mail Stop Patent Ext.  
Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-1450

In re Application of Paul Weigel et al.

Application Number	09/842,930	Filed	4/25/01
For HYALURONAN RECEPTOR FOR ENDOCYTOSIS			
Group Art Unit	1647	Examiner	L. Spector

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows  
(check time period desired):

- |  |           |
|--|-----------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))             | \$ _____  |
| <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$ 420.00 |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))          | \$ _____  |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))           | \$ _____  |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))           | \$ _____  |
- Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 210.00 .
- A check in the amount of the fee is enclosed.
- Payment by credit card. Form PTO-2038 is attached.
- The Commissioner has already been authorized to charge fees in this application to a Deposit Account.
- The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-1700 .  
I have enclosed a duplicate copy of this sheet.

I am the  applicant/inventor

- assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- attorney or agent of record.
- attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a)\_\_\_\_\_.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

6-1-04

Date

Signature

Kathryn L. Hester, Ph.D.

Typed or printed name

06/03/2004 LWONDIM1 00000105 041700 09842930

01 FC:1806

180.00 DA

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 1 forms are submitted.

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210.00 DA